STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received

A PUBLIC DOCUMENT

COVER PAGE PH 2: 12

Please type or print in ink.	(MIDDLE)
NAME OF FILER (LAST) Steinhilber Mark	. Part 1 a 1 a 1 a 1 a 1 a 1 a 1 a 1 a 1 a 1
1. Office, Agency, or Court	Marie Commence
Agency Name (Do not use acronyms) Co. Department of Consideration, Board, Department, District, if applicable Division of Oil Gas and Geother many	servation Vour Position Resources Supervising 0:14 Gas
▶ If filing for multiple positions, list below or on an attachment. (Do not	use acronyms)
Agency:	
2. Jurisdiction of Office (Check at least one box)	
State	☐ Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County	County of
City of	Other
3. Type of Statement (Check at least one box)	The state of the s
Annual: The period covered is January 1, 2017, through December 31, 2017.	Leaving Office: Date Left//(Check one)
The period covered is <u>01 / 61 / 2018</u> , through December 31, 2047. 2018	 The period covered is January 1, 2017, through the date of leaving office. -or-
Assuming Office: Date assumed/	The period covered is/, through the date of leaving office.
Candidate: Date of Election and office sought, if different than Part 1:	
4. Schedule Summary (must complete) ► Total numb Schedules attached	er of pages including this cover page:1
☐ Schedule A-1 - Investments — schedule attached ☐ Schedule A-2 - Investments — schedule attached ☐ Schedule B - Real Property — schedule attached ——Of-	□ Schedule C - Income, Loans, & Business Positions – schedule attached □ Schedule D - Income – Gifts – schedule attached □ Schedule E - Income – Gifts – Travel Payments – schedule attached
None - No reportable interests on any schedule	
5. Verification	
MAILING ADDRESS (Business or Agency Address Recommended - Public Document) STOIL Concernate Ave Sure 100 DAYTIME TELEPHONE NUMBER (714) 715 -244)	state zip code / press CA 90630-4731 E-MAIL ADDRESS: Mark, Steinhilber (a) conservation, ca., gov
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.	
I certify under penalty of perjury under the laws of the State of Calif	
Date Signed 3/30/2018 (month, day, year)	Signature (File the originally signed statement with your filling official.)

FPPC Form 700 (2017/2018)

